	ACCEPTED FOR PROCESSING - 2021 September 13 1
-	September 13 10: <u>1</u> 3
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(Caption of Case) Example: Application for a Class C Charter Certificate from John Doe dba Doe's Limo Request for Name Change on Cortificate from Moving Systems LLC To American Van Lenes Inc. dba men morne dystems	BEFORE THE PUBLIC SERVICE COMMISSION OF SOUTH CAROLINA TRANSPORTATION COVER SHEET DOCKET NUMBER: T If this is your first time filing an application with the PSC, you will not have a Docket Number. The Commission will assign one to you. If you have filed with the Commission before, a Docket Number was assigned and should be entered above.
(Please type or print)	
Submitted by: Address: 218 Creek Rds Rd	Telephone: 336-323-6683 Fax:
Coreens bord NC 27409	Other:
	Email: Karen @ americanvantines
NOTE: The cover sheet and information contained herein neither replace as required by law. This form is required for use by the Public Service be filled out completely. NATURE OF ACTIO	Commission of South Carolina for the purpose of docketing and must
Application – Class C Taxi	Request to Amend Scope of Authority
Application – Class C Charter	Request to Amend Tariff (rate increase, etc.)
Application – Class C Charter Bus	Request to Amend Passenger Limit
Application – Class C Non-Emergency	Request
Application – Class E Household Goods	Exhibit 6
Application – Class E Hazardous Waste	Late-Filed Exhibit
Application	Letter
Request for Extension to Comply with Order	Proposed Order
Request for Order Granting Authority to Obtain Certificate Public Convenience and Necessity to Be Rescinded	of Publisher's Affidavit
Request for Cancellation of Certificate	Reservation Letter
Request for Suspension	Response
Request for Reinstatement	Return to Petition
Request for Name Change on Cartificate	

CLASS E AMENDMENT FORM

Mail - F	Need Assistance with completing the Form 3
Mail or Fax a copy of this form to:	Need Assistance with completing the Form?
Public Service Commission of South Carolina Clerk's Office 101 Executive Center Dr., Ste 100 Columbia, S.C. 29210	SC Office of Regulatory Staff Transportation Department
PHONE (803) 896-5100 FAX (803) 896-5199	PHONE: (803) 737-0800
DATE: 8 31 2021	
I have the following Certificate of Public Convenie	nce and Necessity:
Class E Household Goods # 9774 [Class E Hazardous Waste #
Please consider this as my request for the following	ng amendment(s) to my Certificate:
Name Change	
(Current Name)	(Current DBA, if Applicable)
To: American Van Lines Inc (New Name)	(New DBA, if Applicable)
Scope of Authority	
(Current Scope)	(New Scope)
and a formal hearing before the Public Service Commis	r household goods movers require the filing of a full application sion. Any request to expand beyond three contiguous counties sentation of a shipper witness(s) at the hearing before the PSC.
Tariff (change in rates, fuel surcharge, e	etc. Attach any appropriate documentation)
American Vantines	
118 Creek Ridge Rd	(DBA if applicable) (oreenstoor), NC 27406
(Street and/or Mailing Address)	(City, State, Zip Code)
	President
(Signature)	(Title) Owner, President, etc.
336-323-6683	
(Telephone Number)	